DA Form 2407

Maintenance Request

DA Form 2417

U.S. Army Calibration System Rejected Instrument

DA Form 3023

Gage Record card

DA Form 3758-R

Calibration and Repair Requirements Worksheet

DA Form 7372

TMDE Calibration and Repair Data

DA Label 80

U.S. Army Calibrated Instrument

DA Label 163

U.S. Army Limited or Special Calibration

Appendix B DA Form 4062

B-1. Purpose

To provide use, disposition, and preparation instructions for DA Form 4062 (figure B-1)

B-2. Use

DA Form 4062 is used to provide the TMDE program manager with logistical, technical, and supportability data for making an acquisition decision for TMDE not identified in the DA TMDE PIL or in the DOD Consolidated Equipment List or that is not designated Army or DOD standard equipment. The form will also address Army capability to provide calibration and repair support for the item of TMDE. When additional space or explanation is required, attachments to the form are authorized. Such attachments should be referenced ("see attachment") in the appropriate block of DA Form 4062. If any data on the form are classified, then the completed form will be classified no lower than the highest level of classified data used.

B-3. Disposition

The TMDE program manager will retain completed DA Forms 4062 on file for a minimum of 1 year after a final decision on the request.

COMMANDER US ARMY AVIATION AND MISSILE COMMAND MISSILE MODEL PART NUMBER MISSILE COMMAND MISSILE C	F	TMDE ACQUISITION A or use of this form, see AR 750			-4.
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			24b. PHONE NUMBER / E-MAIL DSN 645-9987/ Joe.Jones@redstone.army.mil		
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DA FORM 4062 OCT 2004 PREVIOUS EDITIONS ARE OBSOLETE	sugh for	43			41018 APD V

Legend for Figure B-1; completion instructions are below.

Figure B-1. Sample of a completed DA Form 4062

- 1a. THRU. Commander, U.S. Army Aviation and Missile Command (AMSAM-TMD-LI), Redstone Arsenal, AL 35898-5000. USATA review is required for supportability analysis.
- 1b. TO. TMDE Program Manager, SFAE-CSS-ME-T, Redstone Arsenal, AL 35898-5400.
- 2. FROM. Enter submitting activity's address.
- 3. TMDE NOMENCLATURE. If available, enter the nomenclature assigned per Supply Bulletin 700-20. If not assigned, enter the manufacturer's nomenclature.
- 4. MODEL/PART NUMBER. If available, use the Joint Electronics Type Designation System (JETDS) number, for example, AN/ PSM-45A. Use the manufacturer's model number or part number if a JETDS number is not available.
- 5. UNIT COST. Enter estimated unit cost of TMDE item proposed.
- 6. NSN. Enter the national stock number for the TMDE item if assigned; otherwise, enter "NA."
- 7. LIN. Enter the TMDE line item number if assigned; otherwise, enter "NA."
- 8. MANUFACTURER'S NAME. Enter the item manufacturer's name.
- 9. CAGE CODE. Enter the commercial activity/Government entiry (CAGE) code to correspond with the name in block 8.
- 10. SYSTEM APPLICATION. Enter the system nomenclature and model number the requested item of TMDE will be used to support.
- 11. RDD. Enter the required delivery date in order to support system in field.
- 12. AUTHORIZATION DOCUMENT. Enter the authorization document for the TMDE including information, such as document number, paragraph, and UIC of obtaining units.

USER SUPPORTABILITY DATA

- 13. END ITEM MEASUREMENT REQUIREMENTS/TMDE SPECIFICATIONS. Enter the end item measurement requirements and critical specifications or required measurement parameters for the TMDE item. A copy of the manufacturer's specifications sheet, or other such document, may be sent as an enclosure to simplify the form. Identify if the item is PIL, PIL candidate, Department of Defense Consolidated Electronic Test Equipment Listing (DODCEL), TEMOD, or IFTE.
- 14. PUBLICATIONS. Enter the name and number of any commercial and/or military manuals. As a minimum, an operator's manual and a maintenance manual should be listed. When applicable, also list the calibration procedure.
- 15. USER MOS OR SKILL. Enter the military occupational specialty or civilian skill code of the TMDE user/operator.
- 16. LEVEL OF USE. Enter the level of maintenance where the TMDE item will be used (for example, D, depot; L, special repair activity; H, general support; F, direct support; O, unit maintenance; C, unit/operator maintenance). If none of the codes applies, enter a brief description in this block or use block 20 (Remarks) to describe how the TMDE will be used.
- 17. MAINT MOS OR SKILL. Enter the military occupational skill or civilian skill code of the TMDE maintainer.
- 18. LEVEL OF MAINT. Enter the level of maintenance at which the TMDE will be maintained (for example, D, depot; L, special repair activity; H, general support; F, direct support; O, unit maintenance; C, unit/operator maintenance). If another level of maintenance applies, enter a brief description in this block or in block 20 (Remarks).
- 19. DISTRIBUTION/QUANTITY. Enter all known geographic locations and quantities where the TMDE will be deployed to include estimated delivery dates. An excerpt from the materiel fielding plan or other document may be added as an enclosure to simplify this entry.
- 20. REMARKS. Enter any pertinent information not covered elsewhere on the form.
- 21a. TYPED NAME AND TITLE. Enter the name and title of the responsible official (for example, TMDE item manager, maintenance engineer, program/project/product manager).
- 21b. PHONE NUMBER/E-MAIL. Commercial or DSN telephone number and e-mail of the responsible official.
- 21c. SIGNATURE. Signature of the person named in block 21a.
- 21d. DATE (YYYYMMDD). Enter the date of the request.

USER SUPPORTABILITY ANALYSIS

- 22. CALIBRATION AND REPAIR SUPPORTABILITY (C&RS). This block attests to the supportability of the item by the Army's TMDE C&RS program.
- 23. REMARKS. Enter any pertinent information to clarify or expand on C&RS issues. An entry in this block is required if item is marked not supportable in block 22.
- 24a. TYPED NAME AND TITLE. Enter the name and title of the responsible USATA official performing the analysis.
- 24b. PHONE NUMBER/E-MAIL. Enter the commercial or DSN telephone number and email of the responsible official.
- 24c. SIGNATURE. Signature of the person named in block 24a.
- 24d. DATE (YYYYMMDD). Enter the date of the analysis.

Figure B-1. Sample of a completed DA Form 4062-Continued